

11-09-05

6,890,022

CO/CD

PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/721,650
		Filing Date	November 25, 2003
		First Named Inventor	Stephen Doncov, et al.
		Art Unit	3612
		Examiner Name	Dennis H. Pedder
Total Number of Pages in This Submission		Attorney Docket Number	536200451COC

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Transmittal letter (in duplicate), Certificate of Correction form (in duplicate), and acknowledgment postcard.
<input type="checkbox"/> Remarks		The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 50-0275. A duplicate copy of this sheet is enclosed.

**Certificate**  
NOV 14 2005

**of Correction**

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name Monte L. Falcoff	Reg. No. 37,617
Signature			
Date	November 8, 2005		

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

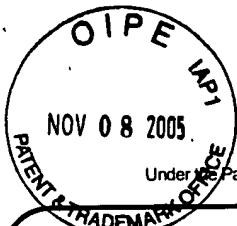
Typed or printed name	Monte L. Falcoff	Express Mail Label No.	EV 717 344 636 US (11/8/2005)
Signature		Date	November 8, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

EV 717 344 636 US

NOV 17 2005



# TRANSMITTAL FORM

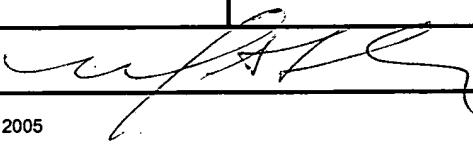
(to be used for all correspondence after initial filing)

		Application Number	10/721,650
		Filing Date	November 25, 2003
		First Named Inventor	Stephen Doncov, et al.
		Art Unit	3612
		Examiner Name	Dennis H. Pedder
Total Number of Pages in This Submission		Attorney Docket Number	536200451COC

## ENCLOSURES (check all that apply)

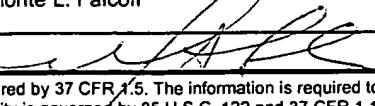
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <small>(please identify below):</small> <b>Transmittal letter (in duplicate), Certificate of Correction form (in duplicate), and acknowledgment postcard.</b>
Remarks		The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 50-0275. A duplicate copy of this sheet is enclosed.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.		Attorney Name Monte L. Falcoff	Reg. No. 37,617
Signature				
Date	November 8, 2005			

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Monte L. Falcoff	Express Mail Label No.	EV 717 344 636 US (11/8/2005)
Signature		Date	November 8, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

NOV 17 2005

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <small>Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</small>		<b>Complete if Known</b>	
<b>FEES TRANSMITTAL</b> <b>for FY 2005</b>		Application Number	10/721,650
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	November 26, 2003
<b>TOTAL AMOUNT OF PAYMENT</b>		First Named Inventor	Stephen Doncov, et al.
<b>(\$)</b> <b>\$100.00</b>		Examiner Name	Dennis H. Pedder
		Art Unit	3612
		Attorney Docket No.	536200451COC

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify) : \_\_\_\_\_

Deposit Account Deposit Account Number: 50-0275 Deposit Account Name: ASC Incorporated

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s)	<input checked="" type="checkbox"/> Credit any overpayments
Under 37 CFR 1.16 and 1.17	

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Small Entity</b>	
				<b>Fee (\$)</b>	<b>Fee (\$)</b>
_____ -20 or HP=	0	x _____	= 0	50	25

HP = highest number of total claims paid for, if greater than 20.

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	
				<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____ - 3 or HP=	0	x _____	= 0	_____	_____

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____	= 0	/ 50 = 0 (round up to a whole number) x	= 0	0

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : Fee for Certificate of Correction

\$100

**SUBMITTED BY**

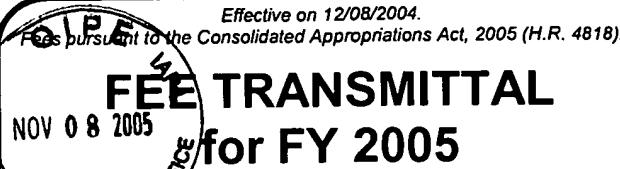
Signature		Registration No. (Attorney/Agent)	37,617	Telephone	248-641-1600
Name (Print/Type)	Monte L. Falcoff			Date	November 8, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

NOV 17 2005

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

 <input checked="" type="checkbox"/> Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		<b>Complete If Known</b>	
		Application Number	10/721,650
		Filing Date	November 25, 2003
		First Named Inventor	Stephen Doncov, et al.
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	Dennis H. Pedder
<input checked="" type="checkbox"/> TRADEMADE		Art Unit	3612
<b>TOTAL AMOUNT OF PAYMENT</b> (\$)		\$100.00	
		Attorney Docket No. 536200451COC	

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify) : \_\_\_\_\_

Deposit Account Deposit Account Number: 50-0275 Deposit Account Name: ASC Incorporated

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments

Under 37 CFR 1.16 and 1.17

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>	
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

**2. EXCESS CLAIM FEES**Fee Description

Each claim over 20 (including Reissues)

Small Entity

Fee (\$) 50 25

Each independent claim over 3 (including Reissues)

Fee (\$) 200 100

Multiple dependent claims

Fee (\$) 360 180

Total ClaimsExtra ClaimsFee (\$)Fee Paid (\$)Multiple Dependent Claims

Fee (\$) 0 0

-20 or HP= 0 x = 0

HP = highest number of total claims paid for, if greater than 20.

Indep. ClaimsExtra ClaimsFee (\$)Fee Paid (\$)

Fee (\$) 0 0

Fee (\$) 0 0

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
—	= 0	/ 50 = 0 (round up to a whole number) x	= 0	0

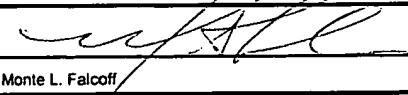
**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : Fee for Certificate of Correction

— \$100

**SUBMITTED BY**

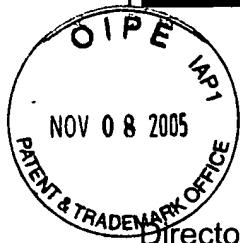
Signature		Registration No. (Attorney/Agent)	37,617	Telephone	248-641-1600
Name (Print/Type)	Monte L. Falcoff			Date	November 8, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

NOV 17 2005

**HARNESS**  
**DICKEY**



November 8, 2005

Director of the United States Patent and Trademark Office  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Re: Patent No. 6,890,022 – Issued: May 10, 2005  
Inventors: Stephen Doncov, Christopher J. Dilluvio, Donald R. Monroe,  
And Jeffrey J. Murtfeldt  
For: AUTOMOTIVE VEHICLE WITH OPEN AIR SYSTEM  
Our Reference: 536200451COC

Sir:

We have reviewed the above-identified patent and have found the following errors which appear to require a Certificate of Correction:

Column 4, line 12 (application page 8, line 3), "an" should be --a--.

Column 10, line 67, Claim 10 (Amendment dated June 22, 2004, page 5, line 12, Claim 12), "form" should be --formed--.

Column 11, line 31, Claim 15 (Amendment dated June 22, 2004, page 6, line 17, Claim 17), after "claim 14," insert --further--.

Column 11, line 34, Claim 15 (Amendment dated June 22, 2004, page 6, line 20, Claim 17), "form" should be --formed--.

Claim 11, line 52, Claim 19 (Amendment dated October 12, 2004, page 7, line 16, Claim 21), after "to" delete "of".

Enclosed herewith is an original and a copy of the Patent and Trademark Office Certificate of Correction form which we request be approved for the above-identified patent. We are enclosing our check in the amount of \$100.00 to cover the fee for the Certificate of Correction. The Commissioner is hereby authorized to charge any fee insufficiencies to

11/10/2005 CNGUYEN 00000022 6890022

01 FC:1811

100.00 0P

FOR COURIER DELIVERY ONLY  
Harness, Dickey & Pierce, P.L.C.  
Attorneys and Counselors  
5445 Corporate Drive  
Troy, Michigan 48098  
248.641.1600

P.O. Box 828  
Bloomfield Hills, MI 48303 U.S.A.

CABLE  
Patents Troy, Michigan  
Telex No. & Reply  
287637 Harness UR  
Telefacsimile 248.641.0270

Metropolitan  
Detroit, MI   St. Louis, MO   Washington, D.C.

[www.hdp.com](http://www.hdp.com)

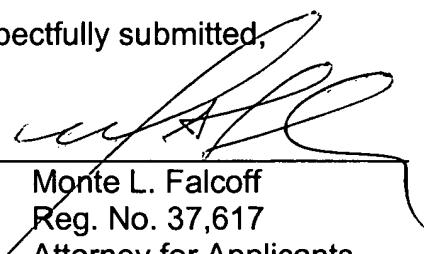
NOV 17 2005

Director of the United States Patent and Trademark Office  
November 8, 2005

Page 2

Deposit Account No. 50-0275 or credit any overpayments to that deposit account. A duplicate copy of this letter is enclosed.

Respectfully submitted,

By: 

Monte L. Falcoff  
Reg. No. 37,617  
Attorney for Applicants

MLF/sed  
Enclosures

NOV 17 2005



November 8, 2005

Director of the United States Patent and Trademark Office  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Re: Patent No. 6,890,022 – Issued: May 10, 2005  
Inventors: Stephen Doncov, Christopher J. Dilluvio, Donald R. Monroe,  
And Jeffrey J. Murtfeldt  
For: AUTOMOTIVE VEHICLE WITH OPEN AIR SYSTEM  
Our Reference: 536200451COC

Sir:

We have reviewed the above-identified patent and have found the following errors which appear to require a Certificate of Correction:

Column 4, line 12 (application page 8, line 3), "an" should be --a--.

Column 10, line 67, Claim 10 (Amendment dated June 22, 2004, page 5, line 12, Claim 12), "form" should be --formed--.

Column 11, line 31, Claim 15 (Amendment dated June 22, 2004, page 6, line 17, Claim 17), after "claim 14," insert --further--.

Column 11, line 34, Claim 15 (Amendment dated June 22, 2004, page 6, line 20, Claim 17), "form" should be --formed--.

Claim 11, line 52, Claim 19 (Amendment dated October 12, 2004, page 7, line 16, Claim 21), after "to" delete "of".

Enclosed herewith is an original and a copy of the Patent and Trademark Office Certificate of Correction form which we request be approved for the above-identified patent. We are enclosing our check in the amount of \$100.00 to cover the fee for the Certificate of Correction. The Commissioner is hereby authorized to charge any fee insufficiencies to

P.O. Box 828  
Bloomfield Hills, MI 48303 U.S.A.

FOR COURIER DELIVERY ONLY  
Harness, Dickey & Pierce, P.L.C.  
Attorneys and Counselors  
5445 Corporate Drive  
Troy, Michigan 48098  
248.641.1600

CABLE  
Patents Troy, Michigan  
Telex No. & Reply  
287637 Harness UR  
Telefacsimile 248.641.0270

Metropolitan  
Detroit, MI      St. Louis, MO      Washington, D.C.

[www.hdp.com](http://www.hdp.com)

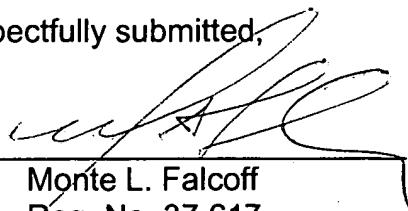
NOV 17 2005

Director of the United States Patent and Trademark Office  
November 8, 2005

Page 2

Deposit Account No. 50-0275 or credit any overpayments to that deposit account. A duplicate copy of this letter is enclosed.

Respectfully submitted,

By: 

Monte L. Falcoff  
Reg. No. 37,617  
Attorney for Applicants

MLF/sed  
Enclosures

NOV 17 2005

**UNITED STATES PATENT AND TRADEMARK OFFICE**  
**CERTIFICATE OF CORRECTION**PATENT NO : 6,890,022 *B2*

DATED : May 10, 2005

INVENTOR(S) : Stephen Doncov, Christopher J. Dilluvio, Donald R. Monroe and Jeffrey J. Murtfeldt

It is certified that error appears in the above-identified patent and that said Letters Patent are hereby corrected as shown below:

Column 4, line 12, "an" should be --a--.

Column 10, line 67, Claim 10, "form" should be --formed--.

Column 11, line 31, Claim 15, after "claim 14," insert --further--.

Column 11, line 34, Claim 15, "form" should be --formed--.

Column 11, line 52, Claim 19, after "to" delete "of".

MAILING ADDRESS OF SENDER:

Monte L. Falcoff, Esq.  
Harness, Dickey & Pierce, P.L.C.  
P.O. Box 828  
Bloomfield Hills, MI 48303

PATENT NO. 6,890,022

No. of additional copies



This collection of information is required by 37 CFR 1.322, 1.323, and 1.324. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.0 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Attention Certificate of Corrections Branch, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*

NOV 17 2005

**UNITED STATES PATENT AND TRADEMARK OFFICE**  
**CERTIFICATE OF CORRECTION**

PATENT NO : 6,890,022 *B2*

DATED : May 10, 2005

INVENTOR(S) : Stephen Doncov, Christopher J. Dilluvio, Donald R. Monroe and Jeffrey J. Murtfeldt

It is certified that error appears in the above-identified patent and that said Letters Patent are hereby corrected as shown below:

Column 4, line 12, "an" should be --a--.

Column 10, line 67, Claim 10, "form" should be --formed--.

Column 11, line 31, Claim 15, after "claim 14," insert --further--.

Column 11, line 34, Claim 15, "form" should be --formed--.

Column 11, line 52, Claim 19, after "to" delete "of".

MAILING ADDRESS OF SENDER: Monte L. Falcoff, Esq.  
Harness, Dickey & Pierce, P.L.C.  
P.O. Box 828  
Bloomfield Hills, MI 48303

PATENT NO. 6,890,022

No. of additional copies



This collection of information is required by 37 CFR 1.322, 1.323, and 1.324. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.0 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Attention Certificate of Corrections Branch, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*

NOV 17 2005